

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Illinois Republican Party

ADDRESS (number and street)

P.O. Box 64897

Check if different
than previously
reported. (ACC)

Chicago

IL

60664

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005926

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dave Syverson, Treasurer

Signature of Treasurer

Electronically Filed by Dave Syverson, Treasurer

Date

12

04

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		135585.12
(b) Cash on Hand at Beginning of Reporting Period	403797.36	
(c) Total Receipts (from Line 19)	301332.51	2599753.32
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	705129.87	2735338.44
7. Total Disbursements (from Line 31)	506927.38	2537135.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	198202.49	198202.49
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	36729.69	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	193100.00	1015545.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	35175.51	477094.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)	228275.51	1492639.91
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5745.93	415195.93
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	234021.44	1907835.84
12. Transfers From Affiliated/Other Party Committees	16314.77	64605.68
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	10.00	2176.12
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	34.76	171.45
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	50951.54	624964.23
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	50951.54	624964.23
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	301332.51	2599753.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	250380.97	1974789.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	17809.21	360683.06
(ii) Non-Federal Share.....	31660.78	613482.47
(b) Other Federal Operating Expenditures.....	48132.06	229325.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	97602.05	1203490.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	350.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5424.00	12451.19
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	4493.75	10493.75
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5000.00	38155.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	5000.00	43155.00
29. Other Disbursements.....	0.00	24.25
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	394407.58	1267170.89
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	394407.58	1267170.89
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	506927.38	2537135.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	475266.60	1923653.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	234021.44	1907835.84
34. Total Contribution Refunds (from Line 28(d))	5000.00	43155.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	229021.44	1864680.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65941.27	590008.40
37. Offsets to Operating Expenditures (from Line 15, page 3)	10.00	2176.12
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65931.27	587832.28

SCHEDULE L (FEC Form 3X)

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AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Illinois Republican Party		
NAME OF ACCOUNT LEVIN		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	162100.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	162100.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	162100.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	162100.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	162100.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	5000.00	5000.00
8. RECEIPTS..... (from Line 3)	0.00	162100.00
9. SUBTOTAL..... (Add Lines 7 and 8)	5000.00	167100.00
10. DISBURSEMENTS..... (From Line 6)	0.00	162100.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	5000.00	5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Mary Abroe

Mailing Address 212 Woodbine Ave

City

Wilmette

State

IL

Zip Code

60091-3332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kendall College

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294312

Amount of Each Receipt this Period

600.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mary Abroe

Mailing Address 212 Woodbine Ave

City

Wilmette

State

IL

Zip Code

60091-3332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kendall College

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295469

Amount of Each Receipt this Period

375.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ven Abiera Aduana

Mailing Address 29 Polo Dr

City

South Barrington

State

IL

Zip Code

60010-7110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neobath

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294739

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Kenneth Alderson

Mailing Address 1211 Chruchill Road

City

Springfield

State

IL

Zip Code

62702-2272

FEC ID number of contributing
federal political committee.

C

Name of Employer
IL Municipal League

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295415

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kenneth Aldridge

Mailing Address 844 E. Rockland Road

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aldridge Electric, Inc.

Occupation

President & CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C294606

Amount of Each Receipt this Period

10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Irene Anderson

Mailing Address 401 Burwash Ave. Apt. 253

City

Savoy

State

IL

Zip Code

61874-9695

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295054

Amount of Each Receipt this Period

60.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

James Baker

Mailing Address 1906 Owens Drive

City

Bloomington

State

IL

Zip Code

61701-7135

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294668

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Sally Barker

Mailing Address 112 Northwood Dr.

City

Mt. Carmel

State

IL

Zip Code

62863-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81202.C295732

Amount of Each Receipt this Period

35.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Eugene Becker

Mailing Address 1008 S. Logan St. Apt. #12

City

Lena

State

IL

Zip Code

61048-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295153

Amount of Each Receipt this Period

70.00

Receipt

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Berry

Mailing Address 813 Timberlake Dr

City

Edwardsville

State

IL

Zip Code

62025-4101

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294322

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Rodney Bertsch

Mailing Address 2306 Plymouth Dr

City

Champaign

State

IL

Zip Code

61821-6540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C295577

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Michael Bertsche

Mailing Address 1080 Muirfield Drive

City

Hanover Park

State

IL

Zip Code

60133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Camcraft Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295498

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

John Betts

Mailing Address 2500 Indigo Ln Unit 354
Unit 354

City State Zip Code
Glenview IL 60026-8307

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294871

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Alfred Biller

Mailing Address 263 Strathmore Ln

City State Zip Code
Bloomington IL 60108-1931

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C294566

Amount of Each Receipt this Period

60.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Wilma Birkeland

Mailing Address 101 W Windsor Rd Apt 6104

City State Zip Code
Urbana IL 61802-6663

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294774

Amount of Each Receipt this Period

110.00

Receipt

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

George Bodeen

Mailing Address 1180 Whitebridge Hill Road

City

Winnetka

State

IL

Zip Code

60093-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: 81202.C295864

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Larry Boes

Mailing Address 4235 E Countryview Dr

City

Byron

State

IL

Zip Code

61010-9161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295360

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sidney Bonser

Mailing Address 1400 W Everett Rd

City

Lake Forest

State

IL

Zip Code

60045-2612

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294869

Amount of Each Receipt this Period

125.00

Receipt

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Daniel Bryant

Mailing Address 949 N Sheridan Rd

City

Lake Forest

State

IL

Zip Code

60045-1435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sheridan Road

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294609

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Marina Carney

Mailing Address 162 W Westminster Road

City

Lake Forest

State

IL

Zip Code

60045-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295684

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Leo Cattoni

Mailing Address 9 Katie Road

City

Lemont

State

IL

Zip Code

60439-9300

FEC ID number of contributing
federal political committee.

C

Name of Employer
IL Marine Towing

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294297

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

11300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Virginia Cattoni

Mailing Address 9 Katie Road

City

Lemont

State

IL

Zip Code

60439

FEC ID number of contributing
federal political committee.

C

Name of Employer
IL Marine Towing

Occupation
Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294298

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Agnes Chrans

Mailing Address 2041 Henley Rd.

City

Springfield

State

IL

Zip Code

62702-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294355

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sharon Conry

Mailing Address 3301 Lakeshore Drive

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295198

Amount of Each Receipt this Period

105.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Charles Courtney

Mailing Address 410 Addison Rd

City

North Riverside

State

IL

Zip Code

60546-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294688

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

James Coxworth

Mailing Address 39W973 Crosscreek Ln

City

Saint Charles

State

IL

Zip Code

60175-6906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Wave

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81023.C294795

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Wanda Crawley

Mailing Address 1213 Prestwicke Dr

City

Herrin

State

IL

Zip Code

62948-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295483

Amount of Each Receipt this Period

40.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Claire Cronin

Mailing Address 315 W. St. Charles Rd.

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Orthopedic Surgeon

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 81017.C294406

Amount of Each Receipt this Period

150.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Timothy Cullinane

Mailing Address 610 S Euclid Ave

City

Oak Park

State

IL

Zip Code

60304-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Psychologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295407

Amount of Each Receipt this Period

700.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Robert Dahlem

Mailing Address 530 N. Lake Shore Drive #1701

City

Chicago

State

IL

Zip Code

60611-7424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295342

Amount of Each Receipt this Period

110.00

Receipt

SUBTOTAL of Receipts This Page (optional)

960.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 141

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Ronald Dobrunz

Mailing Address 1517 Roxbury Ct.

City

Davis

State

IL

Zip Code

61019-9650

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 81022.C294537

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Dodd

Mailing Address 11 Hanover Ln.

City

Aurora

State

IL

Zip Code

60506-9184

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 81202.C294913

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Carol Donovan

Mailing Address 800 N Michigan Ave Apt 3603

City

Chicago

State

IL

Zip Code

60611-2156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith & Donovan Confection-
eriesOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 81202.C295232

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Frederick Eck

Mailing Address 333 S. Cross

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Randolph Group

Occupation

Private Equity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81023.C294794

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Thomas Ehler

Mailing Address 4N281 Rohlwing Rd.

City

Addison

State

IL

Zip Code

60101-1880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295403

Amount of Each Receipt this Period

55.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Harlan England

Mailing Address 576 Knox Rd. 1300 E

City

Maquon

State

IL

Zip Code

61458-9630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295022

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Arthur Fanter

Mailing Address 17 White Oak Dr

City

Coal Valley

State

IL

Zip Code

61240-9571

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295675

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Hilton Fernandez

Mailing Address 426 W Surf St Apt 402

City

Chicago

State

IL

Zip Code

60657-6131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Convenient Food Mart

Occupation
Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295331

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Harriet Fields

Mailing Address 2821 Natalie Dr

City

Champaign

State

IL

Zip Code

61822-7359

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294641

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Harriet Fields

Mailing Address 2821 Natalie Dr

City

Champaign

State

IL

Zip Code

61822-7359

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294779

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Thomas Fitzgibbon, Sr.

Mailing Address 9640 Reding Circle

City

Des Plaines

State

IL

Zip Code

60016-1551

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294974

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Robert Fitzsimmons

Mailing Address 945 S. Batavia Avenue

City

Geneva

State

IL

Zip Code

60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mayer, Brown, Rowe & Maw

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C294587

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

William Fox

Mailing Address 303 E Orleans St

City

Paxton

State

IL

Zip Code

60957-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C294599

Amount of Each Receipt this Period

40.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Rudy Frasca

Mailing Address 906 Airport Rd

City

Urbana

State

IL

Zip Code

61802-7375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frasca International

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294334

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Rita Fredrickson

Mailing Address 14711 HWY. 30

City

Hinckley

State

IL

Zip Code

60520

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 81017.C294389

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

James Froemming

Mailing Address P.O. BOX 6893

City

Rockford

State

IL

Zip Code

61125-1893

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295208

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Dennis Galinsky

Mailing Address 637 Dauphine Ct

City

Northbrook

State

IL

Zip Code

60062-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nuclear Oncology

Occupation
Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295260

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Roger Goddu

Mailing Address 975 Lake Rd

City

Lake Forest

State

IL

Zip Code

60045-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brentwood Associates

Occupation
General Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294504

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

William Graham

Mailing Address 241 Melrose Ave

City

Kenilworth

State

IL

Zip Code

60043-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shendandoah Capital

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 81202.C295877

Amount of Each Receipt this Period

30.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Timothy Grosscup

Mailing Address 131 W Adams St

City

Villa Park

State

IL

Zip Code

60181-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
McDonalds Corp.

Occupation
Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294662

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Hardick

Mailing Address 6025 N Rockwell St

City

Chicago

State

IL

Zip Code

60659-4006

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C295789

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Sue Hauck

Mailing Address RR 4 Box 66

City

Shelbyville

State

IL

Zip Code

62565-9321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: 81202.C295850

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jerry Hayden

Mailing Address 352 Deep Wood Drive

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81023.C294796

Amount of Each Receipt this Period

10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Hayes

Mailing Address 18434 California Ave.

City

Homewood

State

IL

Zip Code

60430-2815

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Army

Occupation

Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294694

Amount of Each Receipt this Period

75.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Ferdynand Hebal

Mailing Address 4257 W Thorndale Ave

City

Chicago

State

IL

Zip Code

60646-6036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295313

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lawrence Hill

Mailing Address 123 E Chamberlin St

City

Dixon

State

IL

Zip Code

61021-2133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295471

Amount of Each Receipt this Period

45.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Roger Hoots

Mailing Address 1285 Maple St.

City

Jacksonville

State

IL

Zip Code

62650-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer
IL School for the Deaf

Occupation

Cook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294459

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Patricia Huffman

Mailing Address 635 Glenayre Drive

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295003

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

George Hughes

Mailing Address 300 W. Keith Ave.

City

Waukegan

State

IL

Zip Code

60085-1923

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294894

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Helen Hughes

Mailing Address 627 Shadycrest Dr

City

Kewanee

State

IL

Zip Code

61443-3844

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C295613

Amount of Each Receipt this Period

55.00

Receipt

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Helen Hughes

Mailing Address 627 Shadycrest Dr

City

Kewanee

State

IL

Zip Code

61443-3844

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C295794

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Helen Hughes

Mailing Address 627 Shadycrest Dr

City

Kewanee

State

IL

Zip Code

61443-3844

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 8

Transaction ID: 81202.C295876

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Hughes

Mailing Address 41W 296 Hughes Road

City

Elburn

State

IL

Zip Code

60119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wiseman Hughes

Occupation

Builder

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C294589

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Robert Isham

Mailing Address 701 Park Pl.

City

Lake Bluff

State

IL

Zip Code

60044-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Billing Services Group

Occupation
lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: 81202.C295856

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Laura Jacksack

Mailing Address 401 W Fullerton Pkwy Apt 909E

City

Chicago

State

IL

Zip Code

60614-9099

FEC ID number of contributing
federal political committee.

C

Name of Employer
Special Counsel

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 81202.C295895

Amount of Each Receipt this Period

60.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lambert Kamp

Mailing Address 15630 S. Catalina Ct.

City

Orland Park

State

IL

Zip Code

60462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294293

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2060.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Patrick Kelly

Mailing Address 404 E. First St.

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
DP Kelly & Associates

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294449

Amount of Each Receipt this Period

9000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Patricia Kennell

Mailing Address 900 W. Grand Oak Dr.

City

Peoria

State

IL

Zip Code

61615-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer
Versa Press, Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294740

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Dathan Kerber

Mailing Address 40 White Pine Rd

City

Geneseo

State

IL

Zip Code

61254-9561

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295678

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

9250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Keith Ketchman

Mailing Address 239 Lincolnshire Ct.

City

Schaumburg

State

IL

Zip Code

60193-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294870

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Christopher Kiczula

Mailing Address 3644 W Belmont Ave

City

Chicago

State

IL

Zip Code

60618-5328

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 81202.C295902

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Monalee Kiefer

Mailing Address 2005 Kochs Ln.

City

Quincy

State

IL

Zip Code

62301-7614

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294724

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Ira Kilgus

Mailing Address 10 Timber Ridge Dr

City

Fairbury

State

IL

Zip Code

61739-9500

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294685

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Rosemary Koehl

Mailing Address 6246 N. 2600 E. Rd.

City

Forrest

State

IL

Zip Code

61741-0603

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295265

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Kajorndej Komulanon

Mailing Address 6543 W. Albert Ave.

City

Morton Grove

State

IL

Zip Code

60053-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 81017.C294370

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Fe Canga Lim

Mailing Address 9411 Neenah Ave

City

Morton Grove

State

IL

Zip Code

60053-1458

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294754

Amount of Each Receipt this Period

125.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Leonard Lockhart

Mailing Address 415 N. Clay St.

City

Hinsdale

State

IL

Zip Code

60521-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294632

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Leonard Lockhart

Mailing Address 415 N. Clay St.

City

Hinsdale

State

IL

Zip Code

60521-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295268

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Douglas MacLeod

Mailing Address 1709 N. North Park

City

Chicago

State

IL

Zip Code

60614-6374

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295228

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Joseph Makula

Mailing Address 7201 Keeney St.

City

Niles

State

IL

Zip Code

60714-3060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295336

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Stephen Malkin

Mailing Address 1850 Second Street #201

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ranger Capital

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295413

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Thomas Mann

Mailing Address 1280 Dolphin Bay Way No. 502

City State Zip Code
 Sarasota FL 34242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Value Analysis

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295496

Amount of Each Receipt this Period

4000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Richard Mark

Mailing Address 2052 Stonebridge Court

City State Zip Code
 Wheaton IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deloitte & Touche, Ltd.

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295497

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Marsh

Mailing Address 27826 E. 1700 North Rd.

City State Zip Code
 Saunemin IL 61769-6013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294665

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Dennis Martin

Mailing Address PO Box 291

City

Minooka

State

IL

Zip Code

60447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Martin Cement Co.

Occupation
Concrete

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294294

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Philip McCully

Mailing Address P.O. Box 97

City

Toluca

State

IL

Zip Code

61369-0097

FEC ID number of contributing
federal political committee.

C

Name of Employer
Philip McCully & Assoc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C295542

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Kent Meridith

Mailing Address 2175 Persimmon Dr

City

St. Charles

State

IL

Zip Code

60174-1395

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294648

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

John Michael

Mailing Address 1016 Seneca Road

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retina Institute of IL

Occupation

Ophthalmologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295004

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Betty Moore

Mailing Address 505 Maple St

City

Greenville

State

IL

Zip Code

62246-1331

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294942

Amount of Each Receipt this Period

35.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Rajan Mullangi

Mailing Address 16 Porgie Ave.

City

Macomb

State

IL

Zip Code

61455-9506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295683

Amount of Each Receipt this Period

75.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Ruth Mundt

Mailing Address 4020 Grand Ave.

City

Western Springs

State

IL

Zip Code

60558-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294745

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

William Nash

Mailing Address 730 Central Ave

City

Wilmette

State

IL

Zip Code

60091-1950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295509

Amount of Each Receipt this Period

40.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Garry Niemeyer

Mailing Address 8370 Auburn Rd.

City

Auburn

State

IL

Zip Code

62615-9264

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294773

Amount of Each Receipt this Period

60.00

Receipt

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Notebaert

Mailing Address 30 S. Wacker Dr.

City

Chicago

State

IL

Zip Code

60606-7413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameritech

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294998

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Olson

Mailing Address 460 Reserve Dr

City

Crystal Lake

State

IL

Zip Code

60012-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dressa North America Ltd

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295685

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Russell Perkinson

Mailing Address PO Box 65

City

Thawville

State

IL

Zip Code

60968-0065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81202.C295658

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Daniel Peterson

Mailing Address 1939 Burr Oak Drive West

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZS Associates, Inc.

Occupation

Marketing Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81202.C295619

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Melanie Peterson

Mailing Address 1939 Burr Oak Drive West

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81202.C295618

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mike Phillippe

Mailing Address 11563 E. 1150th Ave.

City

Robinson

State

IL

Zip Code

62454-4352

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crawford Memorial Hospital

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C295575

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Morris Pieper

Mailing Address 202 W Lincoln St

City

Mount Morris

State

IL

Zip Code

61054-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294626

Amount of Each Receipt this Period

75.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Morris Pieper

Mailing Address 202 W Lincoln St

City

Mount Morris

State

IL

Zip Code

61054-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295281

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Peter Pratt

Mailing Address 35982 W County Line Rd

City

Kirkland

State

IL

Zip Code

60146-8224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294337

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Dan Proft

Mailing Address 118 W. Clinton

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leader Media Company

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 81202.C295885

Amount of Each Receipt this Period

30.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Anne Purcell

Mailing Address 27W332 Churchill Road

City

Winfield

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81202.C295673

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Philip Purcell

Mailing Address 27W332 Churchill Road

City

Winfield

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Continental Investors, LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81202.C295672

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10030.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Regan Ramsey

Mailing Address 302 N Worrel St

City

Bowen

State

IL

Zip Code

62316-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Illinois

Occupation

Department of Natural Resource

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81202.C295755

Amount of Each Receipt this Period

600.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Reardon

Mailing Address 4 Northcrest Ct.

City

Bloomington

State

IL

Zip Code

61701-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C295767

Amount of Each Receipt this Period

125.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Michael Roberts

Mailing Address 328 E 8th St

City

Hinsdale

State

IL

Zip Code

60521-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294505

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Michael Romano

Mailing Address 644 Dalewood Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294451

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Michael Romano

Mailing Address 644 Dalewood Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 81020.C294452

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lee Roupas

Mailing Address 9825 W Circle Pkwy

City

Palos Park

State

IL

Zip Code

60464-1632

FEC ID number of contributing
federal political committee.

C

Name of Employer
P. James Roupas & Associa-
tes

Occupation
Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 81202.C295880

Amount of Each Receipt this Period

30.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10030.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Patrick Ryan Jr

Mailing Address 150 N. Michigan Avenue
Suite 2100

City State Zip Code
Chicago IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Inciscent Technologies

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295487

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

A. Lee Sacks

Mailing Address 107 Woodley Road

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Advocate Health Care

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295412

Amount of Each Receipt this Period

10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Martha Schultz

Mailing Address 7440 Prescott Ln

City State Zip Code
Countryside IL 60525-5038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295178

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

15100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Wilbur Schwark

Mailing Address PO Box 1

City

Bonfield

State

IL

Zip Code

60913-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295335

Amount of Each Receipt this Period

40.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Charles Shive

Mailing Address 7917 W Washington St

City

Belleville

State

IL

Zip Code

62223-2317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294721

Amount of Each Receipt this Period

40.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Charles Shive

Mailing Address 7917 W Washington St

City

Belleville

State

IL

Zip Code

62223-2317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294638

Amount of Each Receipt this Period

30.00

Receipt

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Charles Shive

Mailing Address 7917 W Washington St

City

Belleville

State

IL

Zip Code

62223-2317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295162

Amount of Each Receipt this Period

55.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Steven Siebers

Mailing Address 3119 Acadia Way

City

Quincy

State

IL

Zip Code

62301-7400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295432

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mark Smyk

Mailing Address 50 Grandin Road

City

Morris

State

IL

Zip Code

60450-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grundy County

Occupation

Detective

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294898

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Elinor Swiger

Mailing Address 1933 Burr Oak Dr W

City

Glenview

State

IL

Zip Code

60025-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295193

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mike Swinford

Mailing Address 111 E. Chestnut, #51K

City

Chicago

State

IL

Zip Code

60611-6004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rosenthal Collins

Occupation
Commodity Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295513

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Calvin Tameling

Mailing Address 237 W. Claremont St.

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Set Environmental

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294296

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

12600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Terry Taylor

Mailing Address 15706 E II Route 72

City

Davis Junction

State

IL

Zip Code

61020-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294318

Amount of Each Receipt this Period

30.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Terry Taylor

Mailing Address 15706 E II Route 72

City

Davis Junction

State

IL

Zip Code

61020-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295674

Amount of Each Receipt this Period

30.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Renee Thaler

Mailing Address 3615 Pebble Beach Road

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tranworld Exhibits Inc.

Occupation

Management

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295002

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Renee Thaler

Mailing Address 3615 Pebble Beach Road

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tranworld Exhibits Inc.

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295000

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

David Trost

Mailing Address 2604 Lincoln Trl

City

Taylorville

State

IL

Zip Code

62568-9718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295130

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Raymond Vahling

Mailing Address 52 Herin Pl.

City

Teutopolis

State

IL

Zip Code

62467-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295112

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Linda Van Der Aa

Mailing Address 506 W. Maple Street

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81015.C294295

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

David Varnerin

Mailing Address 1901 N. Cleveland Ave., # E

City

Chicago

State

IL

Zip Code

60614-5215

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295294

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Delbert Wacker

Mailing Address 3807 Brittany Rd.

City

Northbrook

State

IL

Zip Code

60062-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295420

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Delores Wasowicz

Mailing Address 2624 Marwood St

City

River Grove

State

IL

Zip Code

60171-1754

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294909

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Richard Weicher

Mailing Address 537 N. Euclid Ave.

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF Railway

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295145

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

M. Elizabeth Weiss

Mailing Address 1304 Hawthorne Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wells Capital

Occupation
Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294361

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Weiss

Mailing Address 1304 Hawthorn Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wells Capital Management

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81017.C294360

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Pamela Weston

Mailing Address 1180 Laurel Avenue

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Fitness Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295001

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Howard Will

Mailing Address 5055 26th Ave.

City

Rockford

State

IL

Zip Code

61109-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Caldwell Group, Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 81017.C294371

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Lee Willander

Mailing Address 2286 Windish Dr., Apt. 5

City

Galesburg

State

IL

Zip Code

61401-9792

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295307

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Janet Williams

Mailing Address 203 SE 5th St

City

Aledo

State

IL

Zip Code

61231-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294705

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lorraine Wink

Mailing Address 611 S. Oakland Ave.

City

Villa Park

State

IL

Zip Code

60181-3077

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C294625

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Barbara Winterland

Mailing Address 35317 E. 2550 N. Road

City

Colfax

State

IL

Zip Code

61728-7511

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81202.C295311

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kenneth Wolf

Mailing Address PO Box 89

City

Bushnell

State

IL

Zip Code

61422-0089

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C295467

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Robert Zeek

Mailing Address 1000 Doner Dr

City

South Beloit

State

IL

Zip Code

61080-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blackhawk Propane

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C295796

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Gary Zelasko

Mailing Address 743 Hale Ave.

City

Edwardsville

State

IL

Zip Code

62025-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Illinois

Occupation

Meat & Poultry Inspector

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C295113

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Rudy Zvonek

Mailing Address 266 Kansas St

City

Frankfort

State

IL

Zip Code

60423-1467

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81202.C294901

Amount of Each Receipt this Period

30.00

Receipt

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

193100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 141

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

To Protect Our Heritage PAC

Mailing Address 2421 W. Pratt

City

Chicago

State

IL

Zip Code

60645

FEC ID number of contributing
federal political committee.

C C00135541

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295726

Amount of Each Receipt this Period

2000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City

Springfield

State

IL

Zip Code

62705-5458

FEC ID number of contributing
federal political committee.

C C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

116851.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295976

Amount of Each Receipt this Period

651.00

In-Kind

American Airlines - Airfare

C.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City

Springfield

State

IL

Zip Code

62705-5458

FEC ID number of contributing
federal political committee.

C C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

117965.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295977

Amount of Each Receipt this Period

1114.00

In-Kind

United Airlines - Airfare

SUBTOTAL of Receipts This Page (optional)

3765.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 141

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City

Springfield

State

IL

Zip Code

62705-5458

FEC ID number of contributing
federal political committee.

C C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

119691.74

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 81202.C295975

Amount of Each Receipt this Period

1726.74

In-Kind

CountryInn&Suites -Hotel
Rooms

B.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City

Springfield

State

IL

Zip Code

62705-5458

FEC ID number of contributing
federal political committee.

C C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

119945.93

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81202.C295973

Amount of Each Receipt this Period

254.19

In-Kind

Westin Hotel - Hotel Room

SUBTOTAL of Receipts This Page (optional)

1980.93

TOTAL This Period (last page this line number only)

5745.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 141

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Majority Fund 2008

Mailing Address 228 S. Washington St. Suite 115

City

Alexandria

State

VA

Zip Code

22314-

FEC ID number of contributing
federal political committee.

C C00451443

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

64605.68

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295911

Amount of Each Receipt this Period

16314.77

Transfers From Affil./Aut-
h.

NOTE: TRANSFER SEE MEMOS

B.

Full Name (Last, First, Middle Initial)

Benjamin Gettler

Mailing Address 30 Garfield Place

City

Cincinnati

State

OH

Zip Code

45202-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vulcan Co.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295918

Amount of Each Receipt this Period

625.00

Transfer Memo

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Citigroup Inc. PAC - Federal

Mailing Address 1101 Pennsylvania Avenue. NW, #100

City

Washington

State

DC

Zip Code

20004-

FEC ID number of contributing
federal political committee.

C C00008474

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295913

Amount of Each Receipt this Period

625.00

Transfer Memo

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

16314.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 141

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Conaway For Congress

Mailing Address PO Box 51272

City

Midland

State

TX

Zip Code

79710-

FEC ID number of contributing
federal political committee.

C C00383828

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295914

Amount of Each Receipt this Period

3125.00

Transfer Memo

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TRANS PAC

Mailing Address PO Box 365

City

Mc Lean

State

VA

Zip Code

22101-

FEC ID number of contributing
federal political committee.

C C00420661

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3571.43

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295912

Amount of Each Receipt this Period

3571.43

Transfer Memo

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Continuing A Majority PAC

Mailing Address 5915 Eastman Avenue

City

Midland

State

MI

Zip Code

48640-

FEC ID number of contributing
federal political committee.

C C00350462

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.43

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295915

Amount of Each Receipt this Period

1071.43

Transfer Memo

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 141

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Trucking PAC of the American Trucking

Mailing Address Association Inc.
430 First Street SE

City State Zip Code
Washington DC 20003-

FEC ID number of contributing
federal political committee.

C C00002881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295919

Amount of Each Receipt this Period

375.00

Transfer Memo

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Property Casual Insurers Association of

Mailing Address America PAC
2600 South River Road

City State Zip Code
Des Plaines IL 60018-

FEC ID number of contributing
federal political committee.

C C00066472

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295917

Amount of Each Receipt this Period

1250.00

Transfer Memo

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
California Dairies Federal PAC

Mailing Address PO Box 2198

City State Zip Code
Los Banos CA 93635-

FEC ID number of contributing
federal political committee.

C C00349746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 81202.C295916

Amount of Each Receipt this Period

5000.00

Transfer Memo

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

16314.77

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20453

Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

5.58

CREDIT CARD PROCESSING

B. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20454

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

27.75

CREDIT CARD PROCESSING

C. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20455

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

159.50

CREDIT CARD PROCESSING

SUBTOTAL of Disbursements This Page (optional)

192.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 141

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Craig Burkhardt

Mailing Address 4000 Cathedral Drive, Unit 217B

City Washington State DC Zip Code 20016-

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20661

Date of Disbursement

/ /

Amount of Each Disbursement this Period

703.97

MILEAGE REIMBURSEMENT

B.

Full Name (Last, First, Middle Initial)

Craig Burkhardt

Mailing Address 4000 Cathedral Drive, Unit 217B

City Washington State DC Zip Code 20016-

Purpose of Disbursement

REIMBURSEMENT: See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20662

Date of Disbursement

/ /

Amount of Each Disbursement this Period

525.18

REIMBURSEMENT: SEE BELOW

C.

Full Name (Last, First, Middle Initial)

Union League Club Of Chicago

Mailing Address 65 W. Jackson Boulevard

City Chicago State IL Zip Code 60604-

Purpose of Disbursement

Hotel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20665

Date of Disbursement

/ /

Amount of Each Disbursement this Period

360.28

[MEMO ITEM]

MEMO: HOTEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

1229.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Certegy Merchant Relations	Transaction ID: 81202.E20503 Date of Disbursement																				
Mailing Address P.O. Box 30070 TA-02	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	0	8												
<table border="1"> <tr> <td>City Tampa</td> <td>State FL</td> <td>Zip Code 33630-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tampa	State FL	Zip Code 33630-	Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1698.74</td> </tr> </table>	1698.74											
City Tampa	State FL	Zip Code 33630-																			
Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type																			
Candidate Name																					
1698.74																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD PROCESSING																				
B. Full Name (Last, First, Middle Initial) Certegy Merchant Relations	Transaction ID: 81202.E20533 Date of Disbursement																				
Mailing Address P.O. Box 30070 TA-02	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	8		2	0	0	8												
<table border="1"> <tr> <td>City Tampa</td> <td>State FL</td> <td>Zip Code 33630-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tampa	State FL	Zip Code 33630-	Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>24.95</td> </tr> </table>	24.95											
City Tampa	State FL	Zip Code 33630-																			
Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type																			
Candidate Name																					
24.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD PROCESSING																				
C. Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 81202.E20424 Date of Disbursement																				
Mailing Address 2704 Cronin Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
<table border="1"> <tr> <td>City Springfield</td> <td>State IL</td> <td>Zip Code 62711-7083</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Reimbursement: See Below</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Springfield	State IL	Zip Code 62711-7083	Purpose of Disbursement Reimbursement: See Below		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>418.41</td> </tr> </table>	418.41											
City Springfield	State IL	Zip Code 62711-7083																			
Purpose of Disbursement Reimbursement: See Below		<input type="text"/> Category/ Type																			
Candidate Name																					
418.41																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT: SEE BELOW																				

SUBTOTAL of Disbursements This Page (optional)

2142.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Gallinas Pizza	Transaction ID: 81202.E20623 Date of Disbursement
Mailing Address 432 E. Monroe Street	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Springfield State IL Zip Code 62701-	Amount of Each Disbursement this Period <div>20.50</div>
Purpose of Disbursement Meal Reimbursement Candidate Name	<div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM] MEMO: MEAL REIMBURSEMENT	
B. Full Name (Last, First, Middle Initial) Jimmy Johns	Transaction ID: 81202.E20616 Date of Disbursement
Mailing Address 2212 Fox Drive	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Champaign State IL Zip Code 61820-	Amount of Each Disbursement this Period <div>65.40</div>
Purpose of Disbursement Meal Reimbursement Candidate Name	<div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM] MEMO: MEAL REIMBURSEMENT	
C. Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 81202.E20422 Date of Disbursement
Mailing Address 2704 Cronin Dr	<div> <div>11</div> <div>14</div> <div>2008</div> </div>
City Springfield State IL Zip Code 62711-7083	Amount of Each Disbursement this Period <div>256.23</div>
Purpose of Disbursement Mileage Reimbursement Candidate Name	<div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
MILEAGE REIMBURSEMENT	

SUBTOTAL of Disbursements This Page (optional)

256.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Curt Conrad

Mailing Address 2704 Cronin Dr

City Springfield State IL Zip Code 62711-7083

Purpose of Disbursement
Reimbursement: See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20423

Date of Disbursement

/ /

Amount of Each Disbursement this Period

816.68

REIMBURSEMENT: SEE BELOW

B.

Full Name (Last, First, Middle Initial)
InterContinental Hotels

Mailing Address 3 Ravinia Drive
Suite 100

City Atlanta State GA Zip Code 30346-

Purpose of Disbursement
Hotel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20645

Date of Disbursement

/ /

Amount of Each Disbursement this Period

528.40

[MEMO ITEM]

MEMO: HOTEL REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
Priscilla R. DePree

Mailing Address 1945 N Sheffield Ave Apt 203

City Chicago State IL Zip Code 60614-5551

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20412

Date of Disbursement

/ /

Amount of Each Disbursement this Period

41.41

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

858.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Priscilla R. DePree	Transaction ID: 81202.E20413 Date of Disbursement																				
Mailing Address 1945 N Sheffield Ave Apt 203	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Chicago State IL Zip Code 60614-5551	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mileage Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">122.85</td> </tr> </table>	122.85																			
122.85																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MILEAGE REIMBURSEMENT																				
B. Full Name (Last, First, Middle Initial) EDonation 1 Account	Transaction ID: 81202.E20384 Date of Disbursement																				
Mailing Address 118 N. Saint Asaph St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Fundraising Fee Candidate Name	<table border="1"> <tr> <td colspan="10">32.13</td> </tr> </table>	32.13																			
32.13																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	INTERNET FUNDRAISING FEE																				
C. Full Name (Last, First, Middle Initial) EDonation 1 Account	Transaction ID: 81202.E20388 Date of Disbursement																				
Mailing Address 118 N. Saint Asaph St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	0		2	0	0	8												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Fundraising Fee Candidate Name	<table border="1"> <tr> <td colspan="10">37.49</td> </tr> </table>	37.49																			
37.49																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	INTERNET FUNDRAISING FEE																				

SUBTOTAL of Disbursements This Page (optional)

192.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Steve Ettinger <hr/> Mailing Address 1221 Larchmont Dr	Transaction ID: 81202.E20427 Date of Disbursement <div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Springfield State IL Zip Code 62704-2109 Purpose of Disbursement Reimbursement: See Below Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>461.84</div> REIMBURSEMENT: SEE BELOW
B. Full Name (Last, First, Middle Initial) Gallinas Pizza <hr/> Mailing Address 432 E. Monroe Street City Springfield State IL Zip Code 62701- Purpose of Disbursement Meal Reimbursement Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E20624 Date of Disbursement <div> <div>10</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>28.28</div> [MEMO ITEM] MEMO: MEAL REIMBURSEMENT
C. Full Name (Last, First, Middle Initial) Jimmy Johns <hr/> Mailing Address 2212 Fox Drive City Champaign State IL Zip Code 61820- Purpose of Disbursement Meal Reimbursement Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E20617 Date of Disbursement <div> <div>10</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>40.46</div> [MEMO ITEM] MEMO: MEAL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ►

461.84

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Steve Ettinger	Transaction ID: 81202.E20426 Date of Disbursement
Mailing Address 1221 Larchmont Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62704-2109 Purpose of Disbursement Mileage Reimbursement Candidate Name	Amount of Each Disbursement this Period <div>156.20</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
MILEAGE REIMBURSEMENT	
B. Full Name (Last, First, Middle Initial) Steve Ettinger	Transaction ID: 81202.E20428 Date of Disbursement
Mailing Address 1221 Larchmont Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62704-2109 Purpose of Disbursement Mileage Reimbursement Candidate Name	Amount of Each Disbursement this Period <div>238.10</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
MILEAGE REIMBURSEMENT	
C. Full Name (Last, First, Middle Initial) Steve Ettinger	Transaction ID: 81202.E20429 Date of Disbursement
Mailing Address 1221 Larchmont Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62704-2109 Purpose of Disbursement Reimbursement: See Below Candidate Name	Amount of Each Disbursement this Period <div>431.44</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
REIMBURSEMENT: SEE BELOW	

SUBTOTAL of Disbursements This Page (optional)

825.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
InterContinental Hotels

Mailing Address 3 Ravinia Drive
Suite 100

City Atlanta State GA Zip Code 30346-

Purpose of Disbursement
Hotel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20646

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

226.49

[MEMO ITEM]

MEMO: HOTEL REIMBURSEMENT

B.

Full Name (Last, First, Middle Initial)
Jimmy Johns

Mailing Address 2212 Fox Drive

City Champaign State IL Zip Code 61820-

Purpose of Disbursement
Meal Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20618

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

150.92

[MEMO ITEM]

MEMO: MEAL REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 3 Galleria Tower

City Dallas State TX Zip Code 75267-

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20555

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

327.94

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

327.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 3 Galleria Tower

City Dallas State TX Zip Code 75267-

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20545

Date of Disbursement

/ /

Amount of Each Disbursement this Period

523.28

OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
FLS Connect, LLC

Mailing Address 7300 Hudson Blvd N

City Saint Paul State MN Zip Code 55128-7141

Purpose of Disbursement
Party Fundraising Telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81022.E20310

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25977.25

PARTY FUNDRAISING TELEMAR-
KETING

C.

Full Name (Last, First, Middle Initial)
Jason Heffley

Mailing Address 3449 N Racine Ave # 1

City Chicago State IL Zip Code 60657-1536

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20411

Date of Disbursement

/ /

Amount of Each Disbursement this Period

187.20

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

26687.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Marriott Hotels

Mailing Address Marriott Drive

City Washington State DC Zip Code 20058-

Purpose of Disbursement
Party Hotel Room Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20496

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

361.88

PARTY HOTEL ROOM RENTAL

B.

Full Name (Last, First, Middle Initial)
Marriott Hotels

Mailing Address Marriott Drive

City Washington State DC Zip Code 20058-

Purpose of Disbursement
Party Hotel Room Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20497

Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

609.17

PARTY HOTEL ROOM RENTAL

C.

Full Name (Last, First, Middle Initial)
Metropolitan Club

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-6306

Purpose of Disbursement
ROOM RENTAL & CATERING NO CANDIDATE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20535

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

758.10

ROOM RENTAL & CATERING NO
CANDIDATE

SUBTOTAL of Disbursements This Page (optional)

1729.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) The Northern Trust Company	Transaction ID: 81202.E20579 Date of Disbursement																				
Mailing Address 50 S. La Salle St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Chicago State IL Zip Code 60675-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">22.00</td> </tr> </table>	22.00																			
22.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
SERVICE FEE																					
B. Full Name (Last, First, Middle Initial) The Northern Trust Company	Transaction ID: 81202.E20580 Date of Disbursement																				
Mailing Address 50 S. La Salle St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	8												
City Chicago State IL Zip Code 60675-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">22.00</td> </tr> </table>	22.00																			
22.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
SERVICE FEE																					
C. Full Name (Last, First, Middle Initial) The Northern Trust Company	Transaction ID: 81202.E20578 Date of Disbursement																				
Mailing Address 50 S. La Salle St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	6		2	0	0	8												
City Chicago State IL Zip Code 60675-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">29.50</td> </tr> </table>	29.50																			
29.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
SERVICE FEE																					

SUBTOTAL of Disbursements This Page (optional)

73.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Pinnacle Direct, Inc.

Mailing Address 15260 113th St. North

City Stillwater State MN Zip Code 55082-9575

Purpose of Disbursement
Party Fundraising Mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20435

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

5585.96

PARTY FUNDRAISING MAIL

B.

Full Name (Last, First, Middle Initial)
Renaissance Chicago

Mailing Address 933 Skokie Blvd

City Northbrook State IL Zip Code 60062-

Purpose of Disbursement
Party Hotel Room Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20494

Date of Disbursement

11 / 01 / 2008

Amount of Each Disbursement this Period

112.24

PARTY HOTEL ROOM RENTAL

C.

Full Name (Last, First, Middle Initial)
Renaissance Chicago

Mailing Address 933 Skokie Blvd

City Northbrook State IL Zip Code 60062-

Purpose of Disbursement
Party Hotel Room Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20495

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

234.16

PARTY HOTEL ROOM RENTAL

SUBTOTAL of Disbursements This Page (optional)

5932.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 81202.E20673 Date of Disbursement
Mailing Address P.O. Box 660617, Dept. 49	<div> <div>MM / DD / YYYY</div> <div>11 / 14 / 2008</div> </div>
City Dallas State TX Zip Code 75266-0617	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>Amount</div> <div>139.49</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type OFFICE SUPPLIES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 81202.E20546 Date of Disbursement
Mailing Address P.O. Box 660617, Dept. 49	<div> <div>MM / DD / YYYY</div> <div>11 / 16 / 2008</div> </div>
City Dallas State TX Zip Code 75266-0617	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>Amount</div> <div>120.03</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type OFFICE SUPPLIES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Brien Sheahan	Transaction ID: 81202.E20655 Date of Disbursement
Mailing Address 5 St. Regis Court	<div> <div>MM / DD / YYYY</div> <div>11 / 14 / 2008</div> </div>
City Elmhurst State IL Zip Code 60126-	Amount of Each Disbursement this Period
Purpose of Disbursement Meal Reimbursements Candidate Name	<div> <div>Amount</div> <div>160.14</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type MEAL REIMBURSEMENTS
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

419.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Brien Sheahan

Mailing Address 5 St. Regis Court

City
Elmhurst

State
IL

Zip Code
60126-

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 81202.E20654

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

95.94

MILEAGE REIMBURSEMENT

B.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City
Springfield

State
IL

Zip Code
62705-5458

Purpose of Disbursement

American Airlines - Airfare

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 81202.C295976IK

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

651.00

**IN KIND: AMERICAN AIRLINES
- AIRFARE**

C.

Full Name (Last, First, Middle Initial)

Volunteers for Shimkus

Mailing Address P.O. Box 5458

City
Springfield

State
IL

Zip Code
62705-5458

Purpose of Disbursement

United Airlines - Airfare

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 81202.C295977IK

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

1114.00

**IN KIND: UNITED AIRLINES -
AIRFARE**

SUBTOTAL of Disbursements This Page (optional)

1860.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address P.O. Box 5458

City Springfield State IL Zip Code 62705-5458

Purpose of Disbursement
CountryInn&Suites -Hotel Rooms

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.C295975IK
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

1726.74

IN KIND: COUNTRYINN&SUITES
-HOTEL ROOMS

B.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address P.O. Box 5458

City Springfield State IL Zip Code 62705-5458

Purpose of Disbursement
Westin Hotel - Hotel Room

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.C295973IK
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

254.19

IN KIND: WESTIN HOTEL -
HOTEL ROOM

C.

Full Name (Last, First, Middle Initial)
Lance Trover

Mailing Address 616 N 5th St

City Vienna State IL Zip Code 62995-1633

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20410
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

86.58

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

2067.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 2105 E. Cook St.

City Springfield State IL Zip Code 62703-9998

Purpose of Disbursement
Party Fundraising Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20457

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

306.00

PARTY FUNDRAISING POSTAGE

B.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address Station E
100 W. Randolph Street

City Chicago State IL Zip Code 60601-

Purpose of Disbursement
Party Fundraising Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20456

Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

1000.00

PARTY FUNDRAISING POSTAGE

C.

Full Name (Last, First, Middle Initial)
Amanda Wears

Mailing Address 2030 W Irving Park Rd

City Chicago State IL Zip Code 60618-3910

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20417

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

30.00

TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

1336.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 / 141

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address 1683 Constitution Dr

City State Zip Code
Glenview IL 60026-7705

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20409

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

7.02

MILEAGE REIMBURSEMENT

B.

Full Name (Last, First, Middle Initial)

Mike Zolnierowicz

Mailing Address 3648 Venard Rd

City State Zip Code
Downers Grove IL 60515-1349

Purpose of Disbursement
Reimbursement: See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20414

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

606.21

REIMBURSEMENT: SEE BELOW

C.

Full Name (Last, First, Middle Initial)

Little Red Hen

Mailing Address 653 Vernon Avenue

City State Zip Code
Glencoe IL 60022-

Purpose of Disbursement
Meal Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20648

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

252.70

[MEMO ITEM]

MEMO: MEAL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

613.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Mike Zolnierowicz

Mailing Address 3648 Venard Rd

City
Downers Grove

State
IL

Zip Code
60515-1349

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20650

Date of Disbursement

/ /

Amount of Each Disbursement this Period

351.00

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

351.00

TOTAL This Period (last page this line number only)

47557.47

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 80 / 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Smartech Corp.

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401-2181

Purpose of Disbursement
FEA: PHONES - OZINGA

Candidate Name
MARTIN OZINGA, III

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 11

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 81202.E20542

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2627.00

IN KIND: FEA: PHONES - OZ-
INGA

B.

Full Name (Last, First, Middle Initial)
Smartech Corp.

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401-2181

Purpose of Disbursement
FEA: PHONES - KIRK

Candidate Name
MARK STEVEN KIRK

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 10

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 81202.E20543

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2797.00

IN KIND: FEA: PHONES - KI-
RK

SUBTOTAL of Disbursements This Page (optional)

5424.00

TOTAL This Period (last page this line number only)

5424.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Alexander Stuart

Mailing Address 506 N. Washington Rd.

City
Lake Forest

State
IL

Zip Code
60045-

Purpose of Disbursement
Refund of Contribution

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81023.E20383

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 81202.E20537 Date of Disbursement
Mailing Address 515 S. 700 East, Ste. 2C	<div> <div>10</div> <div>16</div> <div>2008</div> </div>
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<div>9822.00</div>
Candidate Name PETER ROSKAM	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA: VOLUNTEER MAIL - ROS-KAM
B. Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 81202.E20538 Date of Disbursement
Mailing Address 515 S. 700 East, Ste. 2C	<div> <div>10</div> <div>21</div> <div>2008</div> </div>
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<div>13743.00</div>
Candidate Name PETER ROSKAM	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA: VOLUNTEER MAIL - ROS-KAM
C. Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 81202.E20539 Date of Disbursement
Mailing Address 515 S. 700 East, Ste. 2C	<div> <div>10</div> <div>29</div> <div>2008</div> </div>
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<div>32318.00</div>
Candidate Name PETER ROSKAM	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA: VOLUNTEER MAIL - ROS-KAM

SUBTOTAL of Disbursements This Page (optional)

55883.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address Bill Payment Center

City State Zip Code
Saginaw MI 48663-

Purpose of Disbursement
FEA: GENERIC PARTY GOTV PHONES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81022.E20313

Date of Disbursement

/ /

Amount of Each Disbursement this Period

369.85

FEA: GENERIC PARTY GOTV
PHONES

B.

Full Name (Last, First, Middle Initial)
Kayleen Carlson

Mailing Address 26304 N Middleton Pkwy

City State Zip Code
Mundelein IL 60060-9126

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20464

Date of Disbursement

/ /

Amount of Each Disbursement this Period

567.32

FEA: PAYROLL

C.

Full Name (Last, First, Middle Initial)
Kayleen Carlson

Mailing Address 26304 N Middleton Pkwy

City State Zip Code
Mundelein IL 60060-9126

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20465

Date of Disbursement

/ /

Amount of Each Disbursement this Period

712.55

FEA: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1649.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 81010.E20066 Date of Disbursement																				
Mailing Address 2704 Cronin Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Springfield State IL Zip Code 62711-7083	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2185.19</td> </tr> </table>	2185.19																			
2185.19																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
B. Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 81010.E20067 Date of Disbursement																				
Mailing Address 2704 Cronin Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Springfield State IL Zip Code 62711-7083	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2185.19</td> </tr> </table>	2185.19																			
2185.19																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
C. Full Name (Last, First, Middle Initial) Priscilla R. DePree	Transaction ID: 81010.E20105 Date of Disbursement																				
Mailing Address 1945 N Sheffield Ave Apt 203	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Chicago State IL Zip Code 60614-5551	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2193.84</td> </tr> </table>	2193.84																			
2193.84																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				

SUBTOTAL of Disbursements This Page (optional)

6564.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Priscilla R. DePree

Mailing Address 1945 N Sheffield Ave Apt 203

City Chicago State IL Zip Code 60614-5551

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20106
Date of Disbursement

/ /

Amount of Each Disbursement this Period

2193.84

FEA: PAYROLL

B.

Full Name (Last, First, Middle Initial)
Steve Ettinger

Mailing Address 1221 Larchmont Dr

City Springfield State IL Zip Code 62704-2109

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20120
Date of Disbursement

/ /

Amount of Each Disbursement this Period

986.37

FEA: PAYROLL

C.

Full Name (Last, First, Middle Initial)
Steve Ettinger

Mailing Address 1221 Larchmont Dr

City Springfield State IL Zip Code 62704-2109

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20121
Date of Disbursement

/ /

Amount of Each Disbursement this Period

986.37

FEA: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4166.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
The Guardian

Mailing Address P.O. Box 8012

City Appleton State WI Zip Code 54913-8012

Purpose of Disbursement
FEA: HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20499

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5289.95

FEA: HEALTH INSURANCE

B.

Full Name (Last, First, Middle Initial)
Jason Heffley

Mailing Address 3449 N Racine Ave # 1

City Chicago State IL Zip Code 60657-1536

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20134

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3676.00

FEA: PAYROLL

C.

Full Name (Last, First, Middle Initial)
Jason Heffley

Mailing Address 3449 N Racine Ave # 1

City Chicago State IL Zip Code 60657-1536

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20135

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3707.00

FEA: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

12672.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Illinois Department of Revenue

Mailing Address P.O. Box 88294

City Chicago State IL Zip Code 60680-

Purpose of Disbursement
FEA: PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20209

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

748.19

FEA: PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
Illinois Department of Revenue

Mailing Address P.O. Box 88294

City Chicago State IL Zip Code 60680-

Purpose of Disbursement
FEA: PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81202.E20395

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

754.04

FEA: PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address P.O. Box 970010

City Saint Louis State MO Zip Code 63197-0010

Purpose of Disbursement
FEA: PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81022.E20291

Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

7260.06

FEA: PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

8762.29

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party**A.**Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address P.O. Box 970010

City State Zip Code
Saint Louis MO 63197-0010Purpose of Disbursement
FEA: PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20397

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Amount of Each Disbursement this Period

7780.76

FEA: PAYROLL TAXES

B.Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address P.O. Box 970010

City State Zip Code
Saint Louis MO 63197-0010Purpose of Disbursement
FEA: PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 81202.E20398

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

7777.59

FEA: PAYROLL TAXES

C.Full Name (Last, First, Middle Initial)
Korzenowski Design

Mailing Address 266 West Lake Street

City State Zip Code
Elmhurst IL 60126-Purpose of Disbursement
FEA: VOLUNTEER MAIL - KIRKCandidate Name
MARK STEVEN KIRKCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 10

Transaction ID: 81202.E20552

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Amount of Each Disbursement this Period

47876.00

FEA: VOLUNTEER MAIL - KIRK

SUBTOTAL of Disbursements This Page (optional)

63434.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Korzenowski Design	Transaction ID: 81202.E20553 Date of Disbursement																				
Mailing Address 266 West Lake Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Elmhurst State IL Zip Code 60126-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - KIRK	<table border="1"> <tr> <td colspan="10">35610.00</td> </tr> </table>	35610.00																			
35610.00																					
Candidate Name MARK STEVEN KIRK	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
FEA: VOLUNTEER MAIL - KIRK																					
B. Full Name (Last, First, Middle Initial) Nancy Mercado	Transaction ID: 81022.E20350 Date of Disbursement																				
Mailing Address 3059 W 38th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Chicago State IL Zip Code 60632-2315	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1037.22</td> </tr> </table>	1037.22																			
1037.22																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
FEA: PAYROLL																					
C. Full Name (Last, First, Middle Initial) Nancy Mercado	Transaction ID: 81022.E20351 Date of Disbursement																				
Mailing Address 3059 W 38th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Chicago State IL Zip Code 60632-2315	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1037.22</td> </tr> </table>	1037.22																			
1037.22																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
FEA: PAYROLL																					

SUBTOTAL of Disbursements This Page (optional)

37684.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Smartech Corp.	Transaction ID: 81202.E20540 Date of Disbursement																				
Mailing Address PO Box 11181	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
City Chattanooga State TN Zip Code 37401-2181	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: GENERIC PARTY GOTV PHONES	<table border="1"> <tr> <td colspan="10">5074.00</td> </tr> </table>	5074.00																			
5074.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: GENERIC PARTY GOTV PHONES																				
B. Full Name (Last, First, Middle Initial) Targeted Creative	Transaction ID: 81202.E20556 Date of Disbursement																				
Mailing Address Communications, Inc. 1000 Duke St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - OZINGA	<table border="1"> <tr> <td colspan="10">34464.26</td> </tr> </table>	34464.26																			
34464.26																					
Candidate Name MARTIN OZINGA, III	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - OZINGA																				
C. Full Name (Last, First, Middle Initial) Targeted Creative	Transaction ID: 81202.E20557 Date of Disbursement																				
Mailing Address Communications, Inc. 1000 Duke St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	8												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - OZINGA	<table border="1"> <tr> <td colspan="10">53413.50</td> </tr> </table>	53413.50																			
53413.50																					
Candidate Name MARTIN OZINGA, III	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - OZINGA																				

SUBTOTAL of Disbursements This Page (optional)

92951.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Lance Trover	Transaction ID: 81010.E20148 Date of Disbursement
Mailing Address 616 N 5th St	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Vienna State IL Zip Code 62995-1633	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: PAYROLL	<div>2018.62</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL
B. Full Name (Last, First, Middle Initial) Lance Trover	Transaction ID: 81010.E20149 Date of Disbursement
Mailing Address 616 N 5th St	<div> <div>11</div> <div>14</div> <div>2008</div> </div>
City Vienna State IL Zip Code 62995-1633	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: PAYROLL	<div>2018.62</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL
C. Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 81022.E20295 Date of Disbursement
Mailing Address 2105 E. Cook St.	<div> <div>10</div> <div>16</div> <div>2008</div> </div>
City Springfield State IL Zip Code 62703-9998	Amount of Each Disbursement this Period
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<div>22265.12</div>
Candidate Name PETER ROSKAM	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROSKAM

SUBTOTAL of Disbursements This Page (optional)

26302.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 81202.E20547 Date of Disbursement																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	1		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>8</td><td>2</td><td>7</td><td>1</td><td>.</td><td>0</td><td>0</td> </tr> </table>	8	2	7	1	.	0	0													
8	2	7	1	.	0	0															
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				
B. Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 81202.E20550 Date of Disbursement																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - KIRK	<table border="1"> <tr> <td>2</td><td>3</td><td>5</td><td>0</td><td>.</td><td>9</td><td>0</td><td>4</td> </tr> </table>	2	3	5	0	.	9	0	4												
2	3	5	0	.	9	0	4														
Candidate Name MARK STEVEN KIRK	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - KIRK																				
C. Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 81202.E20548 Date of Disbursement																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	8
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1	0		2	2		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>8</td><td>2</td><td>7</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	8	2	7	0	.	0	0													
8	2	7	0	.	0	0															
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				

SUBTOTAL of Disbursements This Page (optional)

40050.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) U.S. Postmaster Mailing Address 2105 E. Cook St.	Transaction ID: 81202.E20549 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	4		2	0	0	8												
City Springfield State IL Zip Code 62703-9998 Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM Candidate Name PETER ROSKAM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>14703.00</td> </tr> </table> FEA: VOLUNTEER MAIL - ROS-KAM	14703.00																			
14703.00																					
B. Full Name (Last, First, Middle Initial) U.S. Postmaster Mailing Address 2105 E. Cook St.	Transaction ID: 81202.E20551 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City Springfield State IL Zip Code 62703-9998 Purpose of Disbursement FEA: VOLUNTEER MAIL - KIRK Candidate Name MARK STEVEN KIRK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>17557.33</td> </tr> </table> FEA: VOLUNTEER MAIL - KIRK	17557.33																			
17557.33																					
C. Full Name (Last, First, Middle Initial) Amanda Wears Mailing Address 2030 W Irving Park Rd	Transaction ID: 81010.E20160 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Chicago State IL Zip Code 60618-3910 Purpose of Disbursement FEA: PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1506.07</td> </tr> </table> FEA: PAYROLL	1506.07																			
1506.07																					

SUBTOTAL of Disbursements This Page (optional)

33766.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Amanda Wears	Transaction ID: 81010.E20161 Date of Disbursement																				
Mailing Address 2030 W Irving Park Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Chicago State IL Zip Code 60618-3910	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1506.07</td> </tr> </table>	1506.07																			
1506.07																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
B. Full Name (Last, First, Middle Initial) Joe Weiss	Transaction ID: 81010.E20173 Date of Disbursement																				
Mailing Address 1683 Constitution Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Glenview State IL Zip Code 60026-7705	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1804.94</td> </tr> </table>	1804.94																			
1804.94																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
C. Full Name (Last, First, Middle Initial) Joe Weiss	Transaction ID: 81010.E20174 Date of Disbursement																				
Mailing Address 1683 Constitution Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Glenview State IL Zip Code 60026-7705	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1804.94</td> </tr> </table>	1804.94																			
1804.94																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				

SUBTOTAL of Disbursements This Page (optional)

5115.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 95 / 141

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Mike Zolnierowicz

Mailing Address 3648 Venard Rd

City Downers Grove State IL Zip Code 60515-1349

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20187

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

2701.76

FEA: PAYROLL

B.

Full Name (Last, First, Middle Initial)
Mike Zolnierowicz

Mailing Address 3648 Venard Rd

City Downers Grove State IL Zip Code 60515-1349

Purpose of Disbursement
FEA: PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81010.E20188

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

2701.76

FEA: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

5403.52

TOTAL This Period (last page this line number only)

394407.58

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 96 / 141

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Illinois Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
SBDMNature of Debt (Purpose):
Party Fundraising Mail

Mailing Address P.O. Box 706

City State ZIP Code
Tallahassee FL 32302-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81202.E20684

Amount Incurred This Period

3753.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

3753.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pinnacle Direct, Inc.Nature of Debt (Purpose):
Party Fundraising Mail

Mailing Address 15260 113th St. North

City State ZIP Code
Stillwater MN 55082-9575

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81202.E20436

Amount Incurred This Period

10749.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

10749.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Party Fundraising Telemar-
keting

Mailing Address 7300 Hudson Blvd N

City State ZIP Code
Saint Paul MN 55128-7141

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS81202.E20683

Amount Incurred This Period

22226.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

22226.90

1) SUBTOTALS This Period This Page (optional).....

36729.69

2) TOTALS This Period (last page this line number only).....

36729.69

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

36729.69

SCHEDULE F (FECForm 3X)**ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 97 / 141

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Republican Party		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Full Name of Subordinate Committee	
If YES, name the designating committee:		Mailing Address	
		City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

Smartech Corp.

Purpose of Expenditure
UN- PHONES - BIG-
GERT

Category/Type

Mailing Address

PO Box 11181

City

Chattanooga

State

TN

ZIP Code

37401

Name of Federal Candidate Supported

JUDY BIGGERT

Office Sought: ☒ House

Senate

Presidential

State: ILDistrict: 13

Date

M M

1 0

D D

1 6

Y Y

2 0

Y Y

0 8

Amount

1872.75

Aggregate General Election
Expenditure for this Candidate ▶

3872.75

Transaction ID: 81202.E20541

☐ Limit Raised Due to Opponent's
Spending (2 U.S.C 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) of Each Payee

Smartech Corp.

Purpose of Expenditure
UN- PHONES - ROS-
KAM

Category/Type

Mailing Address

PO Box 11181

City

Chattanooga

State

TN

ZIP Code

37401

Name of Federal Candidate Supported

PETER ROSKAM

Office Sought: ☒ House

Senate

Presidential

State: ILDistrict: 06

Date

M M

1 0

D D

1 6

Y Y

2 0

Y Y

0 8

Amount

2621.00

Aggregate General Election
Expenditure for this Candidate ▶

4621.00

Transaction ID: 81202.E20544

☐ Limit Raised Due to Opponent's
Spending (2 U.S.C 441a(i)/441a-1)

SUBTOTAL of Expenditures This Page (optional) ▶

4493.75

TOTAL This Period (last page this line number only) ▶

4493.75

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 98 / 141
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

NAME OF ACCOUNT

IL Republican Party
Northern Trust No

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

TOTAL AMOUNT TRANSFERRED

33447.67

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

33447.67

Transaction ID: H381202.C295926

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 99 / 141
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

NAME OF ACCOUNT
 IL Republican Party
 Northern Trust No

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

17503.87

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

17503.87

Transaction ID: H381202.C295927

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

50951.54

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

50951.54

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 100 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

205 Randolph Investors, LLC

Mailing Address

205 W. Randolph

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

898170.84

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481010.E20015

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1464.34

2603.26

4067.60

B. Full Name (Last, First, Middle Initial)

Vista Realty, Inc.

Mailing Address

220 W. Carpenter St.

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

921455.54

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Transaction ID: H481010.E20019

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

504.00

896.00

1400.00

C. Full Name (Last, First, Middle Initial)

Patton Boggs, LLP

Mailing Address

2550 M St NW

City State Zip Code

Washington DC 20037-1301

Purpose of Disbursement:
Consulting: LegalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

883054.29

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: H481010.E20022

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.14

7.36

11.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1972.48

3506.62

5479.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Patton Boggs, LLP

Mailing Address

2550 M St NW

City

Washington

State

DC

Zip Code

20037-1301

Purpose of Disbursement:

Consulting: Legal

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

920055.54

Date

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: H481010.E20023

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1267.56

2253.44

3521.00

B. Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address

P.O. Box 970010

City

Saint Louis

State

MO

Zip Code

63197-0010

Purpose of Disbursement:

Non-FEA Payroll Taxes

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

874937.42

Date

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: H481022.E20290

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

187.45

333.24

520.69

C. Full Name (Last, First, Middle Initial)

AT&T

Mailing Address

Bill Payment Center

City

Saginaw

State

MI

Zip Code

48663-

Purpose of Disbursement:

Telephone Service

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872402.09

Date

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: H481022.E20312

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

69.76

124.01

193.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1524.77

2710.69

4235.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

Bill Payment Center

City State Zip Code
 Saginaw MI 48663-

Purpose of Disbursement:
 Telephone Service

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

886315.92

Date M M / D D / Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: H481202.E20387

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-108.15

-192.26

-300.41

B. Full Name (Last, First, Middle Initial)
 Joe Weiss

Mailing Address

1683 Constitution Dr

City State Zip Code
 Glenview IL 60026-7705

Purpose of Disbursement:
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877889.31

Date M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20389

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.48

75.52

118.00

C. Full Name (Last, First, Middle Initial)
 Office Max

Mailing Address

P.O. Box 9020

City State Zip Code
 Des Moines IA 50368-

Purpose of Disbursement:
 Office Supply Reimbursement

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53.86

Date M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20473

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.39

34.47

53.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-65.67

-116.74

-182.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 103 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Sprint PCS

Mailing Address

P.O. Box 740602

City State Zip Code

Cincinnati OH 45274-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.00

Date M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20478

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.00

32.00

50.00

B. Full Name (Last, First, Middle Initial)
 Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
 Parking Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

203.00

Date M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20468

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

73.08

129.92

203.00

C. Full Name (Last, First, Middle Initial)
 T-Mobile Wireless

Mailing Address

P.O. Box 790047

City State Zip Code

Saint Louis MO 63179-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20466

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.00

64.00

100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 104 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Verizon Wireless

Mailing Address

P.O. Box 25506

City State Zip Code

Lehigh Valley

PA

18002-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y

10 / 31 / 2008

Transaction ID: H481202.E20471

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.00

64.00

100.00

B. Full Name (Last, First, Middle Initial)
 City Service Taxi Association

Mailing Address

2601 W. Peterson Avenue

City State Zip Code

Chicago

IL

60659-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10.00

Date M M / D D / Y Y Y Y

10 / 31 / 2008

Transaction ID: H481202.E20470

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.60

6.40

10.00

C. Full Name (Last, First, Middle Initial)
 Standard Parking

Mailing Address

900 N. Michigan Avenue Suite 1600

City State Zip Code

Chicago

IL

60611-

Purpose of Disbursement:
 Parking Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

49.00

Date M M / D D / Y Y Y Y

10 / 31 / 2008

Transaction ID: H481202.E20493

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.64

31.36

49.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 105 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Koam Taxi Association

Mailing Address

6330 N. Clark Street

City

State

Zip Code

Chicago

IL

60660-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17.25

Date

M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20477

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.21

11.04

17.25

B. Full Name (Last, First, Middle Initial)
 Pats Pizza

Mailing Address

638 S. Clark Street

City

State

Zip Code

Chicago

IL

60605-

Purpose of Disbursement:
 Meal Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.66

Date

M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20476

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.24

16.42

25.66

C. Full Name (Last, First, Middle Initial)
 Interpark

Mailing Address

55 E. Monroe

City

State

Zip Code

Chicago

IL

60603-

Purpose of Disbursement:
 Parking Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61.00

Date

M M / D D / Y Y Y Y

1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20479

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.96

39.04

61.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 106 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Taxi Affiliation Services, LLP

Mailing Address

2230 S Wabash Ave

City	State	Zip Code
Chicago	IL	60616-2110

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13.00

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20474

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.68

8.32

13.00

B. Full Name (Last, First, Middle Initial)
 Linos Restaurant

Mailing Address

265 Peterson Road

City	State	Zip Code
Libertyville	IL	60048-

Purpose of Disbursement:
 Meal Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

75.66

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20492

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.24

48.42

75.66

C. Full Name (Last, First, Middle Initial)
 City Taxi Association

Mailing Address

2601 W. Peterson

City	State	Zip Code
Chicago	IL	60659-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7.00

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20480

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.52

4.48

7.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 107 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Joe Weiss

Mailing Address

1683 Constitution Dr

City State Zip Code
Glenview IL 60026-7705

Purpose of Disbursement:
Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887322.63

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20390

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 129.32		<input type="text"/> 229.89		<input type="text"/> 359.21

B. Full Name (Last, First, Middle Initial)
Sams Club

Mailing Address

P.O. Box 660617, Dept. 49

City State Zip Code
Dallas TX 75266-0617

Purpose of Disbursement:
Office Supply Reimbursement

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

290.21

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20512

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 104.48		<input type="text"/> 185.73		<input type="text"/> 290.21

C. Full Name (Last, First, Middle Initial)
Walgreens Company

Mailing Address

200 Wilmot Road

City State Zip Code
Deerfield IL 60015-

Purpose of Disbursement:
Office Supply Reimbursement

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8.24

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20508

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 2.97		<input type="text"/> 5.27		<input type="text"/> 8.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 129.32		<input type="text"/> 229.89		<input type="text"/> 359.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Republican National Lawyers Association

Mailing Address

310 First Street, SE

City State Zip Code

Washington DC 20003-

Purpose of Disbursement:
Seminar FeeCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

214.00

Activity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]**Seminar FeeDate M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20675

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

77.04

136.96

214.00

B. Full Name (Last, First, Middle Initial)
 Office Max

Mailing Address

P.O. Box 9020

City State Zip Code

Des Moines IA 50368-

Purpose of Disbursement:
Office Supply ReimbursementCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94.82

Activity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]**Office Supply ReimbursementDate M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20505

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.14

60.68

94.82

C. Full Name (Last, First, Middle Initial)
 FedEx Kinkos

Mailing Address

3 Galleria Tower

City State Zip Code

Dallas TX 75267-

Purpose of Disbursement:
Party Printing Non-CandidateCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221.18

Activity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]**Party Printing Non-CandidateDate M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20515

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.62

141.56

221.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 109 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

434.00

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20469

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

156.24

277.76

434.00

B. Full Name (Last, First, Middle Initial)

T-Mobile Wireless

Mailing Address

P.O. Box 790047

City State Zip Code

Saint Louis MO 63179-

Purpose of Disbursement:
Cell Phone ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

155.79

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20467

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

56.08

99.71

155.79

C. Full Name (Last, First, Middle Initial)

Yellow Cab Management Inc.

Mailing Address

2230 South Michigan

City State Zip Code

Chicago IL 60616-

Purpose of Disbursement:
Cab ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.00

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20510

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.00

16.00

25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 110 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address

P.O. Box 25506

City State Zip Code
Lehigh Valley PA 18002-

Purpose of Disbursement:
Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

441.15

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20472

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

158.81

282.34

441.15

B. Full Name (Last, First, Middle Initial)
Chef Petros Restaurant

Mailing Address

160 N. LaSalle

City State Zip Code
Chicago IL 60602-

Purpose of Disbursement:
Meal Reimbursement

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53.49

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20513

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.26

34.23

53.49

C. Full Name (Last, First, Middle Initial)
Flash Taxi

Mailing Address

709 N. Main

City State Zip Code
Mount Prospect IL 60056-

Purpose of Disbursement:
Cab Reimbursement

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

29.00

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20509

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.44

18.56

29.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 111 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Standard Parking

Mailing Address

900 N. Michigan Avenue Suite 1600

City State Zip Code

Chicago IL 60611-

Purpose of Disbursement:
 Parking Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19.00

Date M M / D D / Y Y Y Y

1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20516

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.84

12.16

19.00

B. Full Name (Last, First, Middle Initial)
 Acme Currency Exchange

Mailing Address

205 W. Randolph St.

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
 Notary Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Notary Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1.00

Date M M / D D / Y Y Y Y

1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20511

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.36

0.64

1.00

C. Full Name (Last, First, Middle Initial)
 Bestcom Wireless

Mailing Address

179 W. Washington Street

City State Zip Code

Chicago IL 60602-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y

1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20514

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.00

64.00

100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 112 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Interpark

Mailing Address

55 E. Monroe

 City State Zip Code
Chicago IL 60603-

 Purpose of Disbursement:
Parking Reimbursement
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21
[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13.00

 Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20679

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.68

8.32

13.00

B. Full Name (Last, First, Middle Initial)
InterContinental Hotels

Mailing Address

3 Ravinia Drive Suite 100

 City State Zip Code
Atlanta GA 30346-

 Purpose of Disbursement:
Hotel Reimbursement
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21
[MEMO ITEM] Hotel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118.77

 Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20506

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

42.76

76.01

118.77

C. Full Name (Last, First, Middle Initial)
Taxi Affiliation Services, LLP

Mailing Address

2230 S Wabash Ave

 City State Zip Code
Chicago IL 60616-2110

 Purpose of Disbursement:
Cab Reimbursement
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21
[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.00

 Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20475

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.00

16.00

25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 113 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Millennium Park Garage

Mailing Address

520 N Orleans Street

City State Zip Code

Chicago IL 60659-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22.00

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20680

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.92

14.08

22.00

B. Full Name (Last, First, Middle Initial)

Ritz-Carlton

Mailing Address

100 Carondelet Plaza

City State Zip Code

Saint Louis MO 63105-

Purpose of Disbursement:
Hotel ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Hotel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

407.26

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20681

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

146.61

260.65

407.26

C. Full Name (Last, First, Middle Initial)

Nancy Mercado

Mailing Address

3059 W 38th St

City State Zip Code

Chicago IL 60632-2315

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887330.87

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20391

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.97

5.27

8.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.97

5.27

8.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 114 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

AT&T

Mailing Address

Bill Payment Center

 City State Zip Code
Saginaw MI 48663-

 Purpose of Disbursement:
Telephone Service
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
-
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
-
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

878053.57

 Date M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20392

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.13		105.13		164.26

B. Full Name (Last, First, Middle Initial)

AT&T

Mailing Address

Bill Payment Center

 City State Zip Code
Saginaw MI 48663-

 Purpose of Disbursement:
Telephone Service
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
-
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
-
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

888191.18

 Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20393

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.48		157.29		245.77

C. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

 City State Zip Code
Vienna IL 62995-1633

 Purpose of Disbursement:
Mileage Reimbursement
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
-
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
-
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881351.92

 Date M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20399

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.80		63.65		99.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
183.41		326.07		509.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 115 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

 Purpose of Disbursement:
Reimbursement: See Memos
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881429.83

 Date M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20400

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

28.05

49.86

77.91

B. Full Name (Last, First, Middle Initial)
Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

 Purpose of Disbursement:
Mileage Reimbursement
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892309.18

 Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20401

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.90

38.94

60.84

C. Full Name (Last, First, Middle Initial)
Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

 Purpose of Disbursement:
Reimbursement: See Memos
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892515.27

 Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20402

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.19

131.90

206.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

124.14

220.70

344.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 116 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:
Mileage ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881476.63

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20403

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.85

29.95

46.80

B. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881675.29

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20404

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

71.52

127.14

198.66

C. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:
Mileage ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892560.90

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20405

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.43

29.20

45.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

104.80

186.29

291.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 117 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Jason Heffley

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892770.69

Activity or Event Identifier:

ADMINISTRATION B 21

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20406

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

75.52

134.27

209.79

B. Full Name (Last, First, Middle Initial)

Priscilla R. DePree

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

1945 N Sheffield Ave Apt 203

City

State

Zip Code

Chicago

IL

60614-5551

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882074.93

Activity or Event Identifier:

ADMINISTRATION B 21

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: H481202.E20407

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.12

74.88

117.00

C. Full Name (Last, First, Middle Initial)

Priscilla R. DePree

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

1945 N Sheffield Ave Apt 203

City

State

Zip Code

Chicago

IL

60614-5551

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

900425.97

Activity or Event Identifier:

ADMINISTRATION B 21

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20408

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.06

124.56

194.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

187.70

333.71

521.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 118 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City	State	Zip Code
Chicago	IL	60618-3910

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882665.17

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20415

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.00

32.00

50.00

B. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City	State	Zip Code
Chicago	IL	60618-3910

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

901251.08

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20416

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.28

30.72

48.00

C. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City	State	Zip Code
Springfield	IL	62711-7083

Purpose of Disbursement:
Mileage ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

902752.94

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20418

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

108.67

193.19

301.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

143.95

255.91

399.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 119 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Curt Conrad

Mailing Address
 2704 Cronin Dr

City State Zip Code
 Springfield IL 62711-7083

Purpose of Disbursement:
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882848.84

Date M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20419

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.00

64.00

100.00

B. Full Name (Last, First, Middle Initial)
 Curt Conrad

Mailing Address
 2704 Cronin Dr

City State Zip Code
 Springfield IL 62711-7083

Purpose of Disbursement:
 Mileage Reimbursement

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882938.93

Date M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20420

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

32.43

57.66

90.09

C. Full Name (Last, First, Middle Initial)
 Curt Conrad

Mailing Address
 2704 Cronin Dr

City State Zip Code
 Springfield IL 62711-7083

Purpose of Disbursement:
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

902982.53

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20421

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

82.65

146.94

229.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

151.08

268.60

419.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 120 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Steve Ettinger

Mailing Address

1221 Larchmont Dr

City	State	Zip Code
Springfield	IL	62704-2109

Purpose of Disbursement:
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

883042.79

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20425

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.39		66.47		103.86

B. Full Name (Last, First, Middle Initial)
 Neopost

Mailing Address

P.O. Box 73740

City	State	Zip Code
Chicago	IL	60673-

Purpose of Disbursement:
 Generic Non-FEA Party Postage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872602.09

Date

M	M
1	0

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20430

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00		128.00		200.00

C. Full Name (Last, First, Middle Initial)
 Neopost

Mailing Address

P.O. Box 73740

City	State	Zip Code
Chicago	IL	60673-

Purpose of Disbursement:
 Generic Non-FEA Party Postage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

890882.59

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20431

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.39		150.02		234.41

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.78		344.49		538.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 121 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Neopost

Mailing Address

P.O. Box 73740

City	State	Zip Code
Chicago	IL	60673-

Purpose of Disbursement:
 Generic Non-FEA Party Postage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

915501.76

Date

M	M
1	1

 /

D	D
2	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20432

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

B. Full Name (Last, First, Middle Initial)
 LexisNexis

Mailing Address

P.O. Box 2314

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:
 Research Application

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

873235.62

Date

M	M
1	0

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20433

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.02		199.14		311.16

C. Full Name (Last, First, Middle Initial)
 LexisNexis

Mailing Address

P.O. Box 2314

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:
 Research Application

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

894103.24

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20434

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.02		199.14		311.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.04		430.28		672.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 122 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Wells Fargo Financial Capital

Mailing Address
 PO Box 7777

City State Zip Code
 San Francisco CA 94120-7777

Purpose of Disbursement:
 Postage Meter Lease

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

873975.63

Date M M / D D / Y Y Y Y
 1 0 / 1 6 / 2 0 0 8

Transaction ID: H481202.E20437

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

266.40

473.61

740.01

B. Full Name (Last, First, Middle Initial)
 Wells Fargo Financial Capital

Mailing Address
 PO Box 7777

City State Zip Code
 San Francisco CA 94120-7777

Purpose of Disbursement:
 Postage Meter Lease

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

903722.54

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20438

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

266.40

473.61

740.01

C. Full Name (Last, First, Middle Initial)
 Commonwealth Edison

Mailing Address
 Bill Payment Center

City State Zip Code
 Chicago IL 60668-0001

Purpose of Disbursement:
 Utilities

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872794.55

Date M M / D D / Y Y Y Y
 1 0 / 1 6 / 2 0 0 8

Transaction ID: H481202.E20439

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

69.29

123.17

192.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

602.09

1070.39

1672.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 123 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Commonwealth Edison

Mailing Address

Bill Payment Center

City	State	Zip Code
Chicago	IL	60668-0001

Purpose of Disbursement:
 Utilities

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

891078.51

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20440

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.53		125.39		195.92

B. Full Name (Last, First, Middle Initial)
 United Parcel Service

Mailing Address

Lockbox 577

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:
 Parcel Delivery

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872186.26

Date

M	M
1	0

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20441

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.26		128.45		200.71

C. Full Name (Last, First, Middle Initial)
 United Parcel Service

Mailing Address

Lockbox 577

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:
 Parcel Delivery

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887480.24

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20442

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.77		95.60		149.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
196.56		349.44		546.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
DirecTV

Mailing Address

450 Pryor Blvd.

City	State	Zip Code
Sturgis	KY	42459-

 Purpose of Disbursement:
Cable Television
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872924.46

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: H481202.E20443

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

46.77

83.14

129.91

B. Full Name (Last, First, Middle Initial)
DirecTV

Mailing Address

450 Pryor Blvd.

City	State	Zip Code
Sturgis	KY	42459-

 Purpose of Disbursement:
Cable Television
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

891241.08

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20444

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

46.77

83.14

129.91

C. Full Name (Last, First, Middle Initial)
Puritan Springs Water

Mailing Address

1709 North Kickapoo

City	State	Zip Code
Lincoln	IL	62656-

 Purpose of Disbursement:
Bottled Water
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

872208.32

 Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: H481202.E20445

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.94

14.12

22.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

101.48

180.40

281.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Puritan Springs Water

Mailing Address

1709 North Kickapoo

City State Zip Code

Lincoln IL 62656-

Purpose of Disbursement:
Bottled WaterCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887533.19

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20446

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.22

5.73

8.95

B. Full Name (Last, First, Middle Initial)

Access One

Mailing Address

820 W Jackson Blvd Fl 6

City State Zip Code

Chicago IL 60607-3026

Purpose of Disbursement:
Telephone ServiceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

874416.73

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: H481202.E20447

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

158.80

282.30

441.10

C. Full Name (Last, First, Middle Initial)

Access One

Mailing Address

820 W Jackson Blvd Fl 6

City State Zip Code

Chicago IL 60607-3026

Purpose of Disbursement:
Telephone ServiceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

916534.54

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Transaction ID: H481202.E20448

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

174.79

310.74

485.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

336.81

598.77

935.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 126 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Law Offices of John Fogarty Jr.

Mailing Address

4043 N. Ravenswood Suite 225

City	State	Zip Code
Chicago	IL	60613-

Purpose of Disbursement:
Legal Fees

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877437.42

Date 10 / 21 / 2008

Transaction ID: H481202.E20451

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

900.00

1600.00

2500.00

B. Full Name (Last, First, Middle Initial)
Law Offices of John Fogarty Jr.

Mailing Address

4043 N. Ravenswood Suite 225

City	State	Zip Code
Chicago	IL	60613-

Purpose of Disbursement:
Legal Fees

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

913372.73

Date 11 / 14 / 2008

Transaction ID: H481202.E20452

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3474.07

6176.12

9650.19

C. Full Name (Last, First, Middle Initial)
Sweet Petal

Mailing Address

537 S. Dearborn Street

City	State	Zip Code
Chicago	IL	60605-

Purpose of Disbursement:
Flowers

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877487.03

Date 10 / 23 / 2008

Transaction ID: H481202.E20458

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.86

31.75

49.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4391.93

7807.87

12199.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 127 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Edible Arrangements

Mailing Address

95 Barnes Road

City State Zip Code

Wallingford CT 06492-

Purpose of Disbursement:
Food BasketCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877579.81

Date MM / DD / YYYY
10 / 24 / 2008

Transaction ID: H481202.E20459

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.40		59.38		92.78

B. Full Name (Last, First, Middle Initial)

Pats Pizza

Mailing Address

638 S. Clark Street

City State Zip Code

Chicago IL 60605-

Purpose of Disbursement:
FoodCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877637.81

Date MM / DD / YYYY
10 / 27 / 2008

Transaction ID: H481202.E20460

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88		37.12		58.00

C. Full Name (Last, First, Middle Initial)

Pats Pizza

Mailing Address

638 S. Clark Street

City State Zip Code

Chicago IL 60605-

Purpose of Disbursement:
FoodCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882748.84

Date MM / DD / YYYY
10 / 31 / 2008

Transaction ID: H481202.E20461

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.12		53.55		83.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.40		150.05		234.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

CVS - Chicago

Mailing Address

208 W. Washington

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882615.17

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: H481202.E20462

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.69

19.00

29.69

B. Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address

P.O. Box 970010

City State Zip Code
Saint Louis MO 63197-0010Purpose of Disbursement:
Non-FEA Payroll TaxesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

878057.47

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: H481202.E20463

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.40

2.50

3.90

C. Full Name (Last, First, Middle Initial)

Brien Sheahan

Mailing Address

5 St. Regis Court

City State Zip Code
Elmhurst IL 60126-Purpose of Disbursement:
Consulting: Mail Program Not-EmployCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881252.47

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: H481202.E20481

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1080.00

1920.00

3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1092.09

1941.50

3033.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 129 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

A-1 Lock Inc

Mailing Address

101 N 4th St.

City

State

Zip Code

Springfield

IL

62701-1298

Purpose of Disbursement:

Keys

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

877771.31

Date

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20482

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.06

85.44

133.50

B. Full Name (Last, First, Middle Initial)

Coffee Unlimited

Mailing Address

1408 South Clinton, #1701

City

State

Zip Code

Chicago

IL

60601-

Purpose of Disbursement:

Office Supplies

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881721.19

Date

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: H481202.E20483

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.52

29.38

45.90

C. Full Name (Last, First, Middle Initial)

Coffee Unlimited

Mailing Address

1408 South Clinton, #1701

City

State

Zip Code

Chicago

IL

60601-

Purpose of Disbursement:

Office Supplies

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892781.44

Date

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20484

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.87

6.88

10.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

68.45

121.70

190.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 VoiceText.com

Mailing Address

211 East 7th Street 12th Floor

City State Zip Code

Austin TX 78701-

Purpose of Disbursement:
 Telephone Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

881957.93

Date 10 / 31 / 2008

Transaction ID: H481202.E20485

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

85.23

151.51

236.74

B. Full Name (Last, First, Middle Initial)
 VoiceText.com

Mailing Address

211 East 7th Street 12th Floor

City State Zip Code

Austin TX 78701-

Purpose of Disbursement:
 Telephone Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

915738.50

Date 11 / 21 / 2008

Transaction ID: H481202.E20486

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

85.23

151.51

236.74

C. Full Name (Last, First, Middle Initial)
 Building Maintenance Services

Mailing Address

3260 Northfield Dr.

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:
 Janitorial Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

878252.47

Date 10 / 31 / 2008

Transaction ID: H481202.E20487

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.20

124.80

195.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

240.66

427.82

668.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 131 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Building Maintenance Services

Mailing Address

3260 Northfield Dr.

City	State	Zip Code
Springfield	IL	62702-

Purpose of Disbursement:
 Janitorial Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

915451.76

Date

M	M
1	1

 /

D	D
2	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20488

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.20

124.80

195.00

B. Full Name (Last, First, Middle Initial)
 Ameren Cilco

Mailing Address

P.O. Box 66826

City	State	Zip Code
Saint Louis	MO	63166-

Purpose of Disbursement:
 Utilities

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882104.14

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20489

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.52

18.69

29.21

C. Full Name (Last, First, Middle Initial)
 City Water Light & Power

Mailing Address

Municipal Center West

City	State	Zip Code
Springfield	IL	62757-

Purpose of Disbursement:
 Utilities

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

882585.48

Date

M	M
1	0

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20490

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

173.28

308.06

481.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

254.00

451.55

705.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 132 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

City Water Light & Power

Mailing Address

Municipal Center West

City State Zip Code

Springfield IL 62757-

Purpose of Disbursement:
UtilitiesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

916049.01

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Transaction ID: H481202.E20491

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

111.78

198.73

310.51

B. Full Name (Last, First, Middle Initial)

The Guardian

Mailing Address

P.O. Box 8012

City State Zip Code

Appleton WI 54913-8012

Purpose of Disbursement:
Non-FEA Health InsuranceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

886135.16

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: H481202.E20500

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1109.11

1971.76

3080.87

C. Full Name (Last, First, Middle Initial)

Peapod Delivery

Mailing Address

9933 Woods Drive

City State Zip Code

Skokie IL 60077-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

886616.33

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: H481202.E20501

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

101.22

179.95

281.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1322.11

2350.44

3672.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 133 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Neopost

Mailing Address

P.O. Box 73740

City State Zip Code
 Chicago IL 60673-

Purpose of Disbursement:
 Generic Non-FEA Party Postage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

886335.16

Date M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 0 8

Transaction ID: H481202.E20502

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 72.00		<input type="text"/> 128.00		<input type="text"/> 200.00

B. Full Name (Last, First, Middle Initial)
 University Of Illinois

Mailing Address

1007 W. Nevada

City State Zip Code
 Urbana IL 61801-

Purpose of Disbursement:
 Policy Luncheon Fee Reimbursement

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Policy Luncheon Fee Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16.00

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20507

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 5.76		<input type="text"/> 10.24		<input type="text"/> 16.00

C. Full Name (Last, First, Middle Initial)
 Markus Veile

Mailing Address

3109 Cascade Dr

City State Zip Code
 Springfield IL 62704-6523

Purpose of Disbursement:
 Consulting:Technical&IT-Not Employee

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

890211.18

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20518

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 720.00		<input type="text"/> 1280.00		<input type="text"/> 2000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 792.00		<input type="text"/> 1408.00		<input type="text"/> 2200.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 134 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Midwest Mailing & Shipping Systems

Mailing Address

3006 Gill St., Ste. A

City

State

Zip Code

Bloomington

IL

61704-2509

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

891111.17

Date

M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20519

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.76

20.90

32.66

B. Full Name (Last, First, Middle Initial)
 Comcast Cable

Mailing Address

P.O. Box 3001

City

State

Zip Code

Southeastern

PA

19398-

Purpose of Disbursement:
 Cable Television

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

898272.19

Date

M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20520

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.49

64.86

101.35

C. Full Name (Last, First, Middle Initial)
 FedEx

Mailing Address

P.O. Box 727

City

State

Zip Code

Memphis

TN

38101-2112

Purpose of Disbursement:
 Parcel Delivery

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887945.41

Date

M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20521

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

148.40

263.82

412.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

196.65

349.58

546.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 135 / 141

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Schirott & Luetkehans

Mailing Address

105 E Irving Park Road PO Box 247

City	State	Zip Code
Itasca	IL	60143-2117

Purpose of Disbursement:
 Consulting: Legal

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

886963.42

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20522

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

233.10

414.40

647.50

B. Full Name (Last, First, Middle Initial)
 Watts Copy System

Mailing Address

2860 Stanton Avenue

City	State	Zip Code
Springfield	IL	62708-

Purpose of Disbursement:
 Copier Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

893031.44

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20523

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

90.00

160.00

250.00

C. Full Name (Last, First, Middle Initial)
 Houser, Inc.

Mailing Address

2332 E. Reservoir

City	State	Zip Code
Springfield	IL	62702-

Purpose of Disbursement:
 Window Cleaning

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

888211.18

Date

M	M
1	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481202.E20524

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.20

12.80

20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

330.30

587.20

917.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 136 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Shadow TV

Mailing Address

630 Ninth Avenue, Suite 1000th Floor

City State Zip Code

New York NY 10036-

Purpose of Disbursement:
News Clipping Service

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

902451.08

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20525

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

432.00

768.00

1200.00

B. Full Name (Last, First, Middle Initial)
The Chicago Club

Mailing Address

P.O. Box 92737

City State Zip Code

Chicago IL 60676-

Purpose of Disbursement:
Party Room Rental & Catering NoCand

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

893621.71

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20526

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

212.50

377.77

590.27

C. Full Name (Last, First, Middle Initial)
Hanson Information Systems

Mailing Address

2433 West White Oaks Dr.

City State Zip Code

Springfield IL 62704-

Purpose of Disbursement:
Internet Access

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

893766.08

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: H481202.E20527

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

51.97

92.40

144.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

696.47

1238.17

1934.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 137 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Huckaby Davis Lisker

Mailing Address

228 South Washington Street Suite 115

City State Zip Code

Alexandria VA 22314-

Purpose of Disbursement:
Cnsltng:Accounting&FEC Not EmployeeCategory/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

900231.35

Date 11 / 14 / 2008

Transaction ID: H481202.E20528

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

705.30

1253.86

1959.16

B. Full Name (Last, First, Middle Initial)

Lake Area Disposal Services

Mailing Address

2106 E. Cornell

City State Zip Code

Springfield IL 62703-

Purpose of Disbursement:
Waste DisposalCategory/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

887524.24

Date 11 / 14 / 2008

Transaction ID: H481202.E20529

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.84

28.16

44.00

C. Full Name (Last, First, Middle Initial)

Garland W. Brinner, CPA

Mailing Address

302 S. Hamilton Street

City State Zip Code

Lincoln IL 62656-

Purpose of Disbursement:
Accounting ServicesCategory/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

890648.18

Date 11 / 14 / 2008

Transaction ID: H481202.E20530

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

157.32

279.68

437.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

878.46

1561.70

2440.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 138 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Michael Clancy

Mailing Address

53 W. Jackson Blvd. Suite 1401

City State Zip Code
 Chicago IL 60604-

Purpose of Disbursement:
 Consulting: Research

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

914862.73

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20531

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

536.40

953.60

1490.00

B. Full Name (Last, First, Middle Initial)
 West Bend Mutual Insurance

Mailing Address

188 Industrial Dr., Ste. 430

City State Zip Code
 Elmhurst IL 60126-

Purpose of Disbursement:
 Non-FEA Insurance

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

893792.08

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20532

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.36

16.64

26.00

C. Full Name (Last, First, Middle Initial)
 Public Storage

Mailing Address

2400 Palmer Drive

City State Zip Code
 Schaumburg IL 60173-

Purpose of Disbursement:
 Storage

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

914977.73

Date M M / D D / Y Y Y Y
 1 1 / 2 0 / 2 0 0 8

Transaction ID: H481202.E20534

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.40

73.60

115.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

587.16

1043.84

1631.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 139 / 141
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Staples

Mailing Address

P.O. Box 30292

City State Zip Code

Salt Lake City UT 84130-

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

915256.76

Date M M / D D / Y Y Y Y
 1 1 / 2 1 / 2 0 0 8

Transaction ID: H481202.E20536

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

100.45

178.58

279.03

B. Full Name (Last, First, Middle Initial)
 Brien Sheahan

Mailing Address

5 St. Regis Court

City State Zip Code

Elmhurst IL 60126-

Purpose of Disbursement:
 Mileage Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

891592.08

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20677

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

126.36

224.64

351.00

C. Full Name (Last, First, Middle Initial)
 Brien Sheahan

Mailing Address

5 St. Regis Court

City State Zip Code

Elmhurst IL 60126-

Purpose of Disbursement:
 Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

892248.34

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: H481202.E20678

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

236.25

420.01

656.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

463.06

823.23

1286.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 140 / 141
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Mike Zolnierowicz

Mailing Address

3648 Venard Rd

City

State

Zip Code

Downers Grove

IL

60515-1349

Purpose of Disbursement:

Reimbursement: See Memos

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

901203.08

Date

M M /

D D /

Y Y Y Y

1 1

1 4

2 0 0 8

Transaction ID: H481202.E20682

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

279.76

497.35

777.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

279.76

497.35

777.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

17809.21

31660.78

49469.99

Form/Schedule: **F3XN**
Transaction ID:

On Schedule F, in order to check NO with respect to the designation by another political party, the software required the entry of UN- in the purpose field.